



Application of:

MICHAEL SACHS

Application No.: 09/855,942

Filed: May 16, 2001

For: MAXIMAL NASAL INTERNAL
SUPPORT SYSTEM

Docket No. 02633.000001.

Examiner: F. Mathew

Group Art Unit: 3764

Date: April 26, 2004

Mail Stop RCE

THE COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 17	MINUS	** 42	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 5	MINUS	*** 8	= 0	x \$43 \$86	\$0
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

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☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$_____ to cover the fee for a ____-month extension is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant

Registration No. 28,246

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

NY_MAIN 424154v1



02633.000001.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: F. Mathew
MICHAEL SACHS)	
	:	
Application No.: 09/855,942)	Group Art Unit: 3764
	:	
Filed: May 16, 2001)	
	:	
For: MAXIMAL NASAL INTERNAL)	
SUPPORT SYSTEM	:	April 26, 2004

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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PRELIMINARY AMENDMENT AND
RENEWED REQUEST FOR PERSONAL INTERVIEW

Sir:

Preliminary to continued examination, please amend the above-identified application as follows, the claim changes being reflected in the listing that begins at page 2, and the Remarks beginning at page 9.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on
April 26, 2004.
(Date of Deposit)

LEONARD P. DIANA (Reg. No. 29,296)
(Name of Attorney for Applicant)


Signature

April 26, 2004
Date of Signature